

107TH CONGRESS  
1ST SESSION

# S. 1269

To amend title XIX of the Social Security Act to revise and simplify the transitional medical assistance (TMA) program.

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## IN THE SENATE OF THE UNITED STATES

JULY 30, 2001

Mr. BREAU (for himself, Mr. CHAFEE, Mr. LIEBERMAN, Mr. GRAHAM, and Ms. LANDRIEU) introduced the following bill; which was read twice and referred to the Committee on Finance

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## A BILL

To amend title XIX of the Social Security Act to revise and simplify the transitional medical assistance (TMA) program.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Transitional Medical  
5 Assistance Improvement Act of 2001”.

1 **SEC. 2. REVISION AND SIMPLIFICATION OF THE TRANSI-**  
 2 **TIONAL MEDICAL ASSISTANCE PROGRAM**  
 3 **(TMA).**

4 (a) OPTION OF CONTINUOUS ELIGIBILITY FOR 12  
 5 MONTHS; OPTION OF CONTINUING COVERAGE FOR UP TO  
 6 AN ADDITIONAL YEAR.—

7 (1) OPTION OF CONTINUOUS ELIGIBILITY FOR  
 8 12 MONTHS BY MAKING REPORTING REQUIREMENTS  
 9 OPTIONAL.—Section 1925(b) of the Social Security  
 10 Act (42 U.S.C. 1396r–6(b)) is amended—

11 (A) in paragraph (1), by inserting “, at the  
 12 option of a State,” after “and which”;

13 (B) in paragraph (2)(A), by inserting  
 14 “Subject to subparagraph (C)—” after “(A)  
 15 NOTICES.—”;

16 (C) in paragraph (2)(B), by inserting  
 17 “Subject to subparagraph (C)—” after “(B)  
 18 REPORTING REQUIREMENTS.—”;

19 (D) by adding at the end the following new  
 20 subparagraph:

21 “(C) STATE OPTION TO WAIVE NOTICE  
 22 AND REPORTING REQUIREMENTS.—A State  
 23 may waive some or all of the reporting require-  
 24 ments under clauses (i) and (ii) of subpara-  
 25 graph (B). Insofar as it waives such a reporting  
 26 requirement, the State need not provide for a

1 notice under subparagraph (A) relating to such  
 2 requirement.”; and

3 (E) in paragraph (3)(A)(iii), by inserting  
 4 “the State has not waived under paragraph  
 5 (2)(C) the reporting requirement with respect  
 6 to such month under paragraph (2)(B) and if”  
 7 after “6-month period if”.

8 (2) STATE OPTION TO EXTEND ELIGIBILITY  
 9 FOR LOW-INCOME INDIVIDUALS FOR UP TO 12 ADDI-  
 10 TIONAL MONTHS.—Section 1925 of such Act (42  
 11 U.S.C. 1396r-6) is further amended—

12 (A) by redesignating subsections (c)  
 13 through (f) as subsections (d) through (g); and

14 (B) by inserting after subsection (b) the  
 15 following new subsection:

16 “(c) STATE OPTION OF UP TO 12 MONTHS OF ADDI-  
 17 TIONAL ELIGIBILITY.—

18 “(1) IN GENERAL.—Notwithstanding any other  
 19 provision of this title, each State plan approved  
 20 under this title may provide, at the option of the  
 21 State, that the State shall offer to each family which  
 22 received assistance during the entire 6-month period  
 23 under subsection (b) and which meets the applicable  
 24 requirement of paragraph (2), in the last month of  
 25 the period the option of extending coverage under

1       this subsection for the succeeding period not to ex-  
2       ceed 12 months.

3               “(2) INCOME RESTRICTION.—The option under  
4       paragraph (1) shall not be made available to a fam-  
5       ily for a succeeding period unless the State deter-  
6       mines that the family’s average gross monthly earn-  
7       ings (less such costs for such child care as is nec-  
8       essary for the employment of the caretaker relative)  
9       as of the end of the 6-month period under sub-  
10      section (b) does not exceed 185 percent of the offi-  
11      cial poverty line (as defined by the Office of Man-  
12      agement and Budget, and revised annually in ac-  
13      cordance with section 673(2) of the Omnibus Budget  
14      Reconciliation Act of 1981) applicable to a family of  
15      the size involved.

16              “(3) APPLICATION OF EXTENSION RULES.—  
17      The provisions of paragraphs (2), (3), (4), and (5)  
18      of subsection (b) shall apply to the extension pro-  
19      vided under this subsection in the same manner as  
20      they apply to the extension provided under sub-  
21      section (b)(1), except that for purposes of this  
22      subsection—

23                      “(A) any reference to a 6-month period  
24                      under subsection (b)(1) is deemed a reference  
25                      to the extension period provided under para-

1 graph (1) and any deadlines for any notices or  
 2 reporting and the premium payment periods  
 3 shall be modified to correspond to the appro-  
 4 priate calendar quarters of coverage provided  
 5 under this subsection; and

6 “(B) any reference to a provision of sub-  
 7 section (a) or (b) is deemed a reference to the  
 8 corresponding provision of subsection (b) or of  
 9 this subsection, respectively.”.

10 (b) STATE OPTION TO WAIVE RECEIPT OF MED-  
 11 ICAID FOR 3 OF PREVIOUS 6 MONTHS TO QUALIFY FOR  
 12 TMA.—Section 1925(a)(1) of such Act (42 U.S.C. 1396r–  
 13 6(a)(1)) is amended by adding at the end the following:  
 14 “A State may, at its option, also apply the previous sen-  
 15 tence in the case of a family that was receiving such aid  
 16 for fewer than 3 months, or that had applied for and was  
 17 eligible for such aid for fewer than 3 months, during the  
 18 6 immediately preceding months described in such sen-  
 19 tence.”.

20 (c) ELIMINATION OF SUNSET FOR TMA.—

21 (1) Subsection (g) of section 1925 of such Act  
 22 (42 U.S.C. 1396r–6), as redesignated under sub-  
 23 section (a)(2), is repealed.

24 (2) Section 1902(e)(1) of such Act (42 U.S.C.  
 25 1396a(e)(1)) is amended by striking “(A) Notwith-

1 standing” and all that follows through “During such  
 2 period, for” in subparagraph (B) and inserting  
 3 “For”.

4 (d) CMS REPORT ON ENROLLMENT AND PARTICIPA-  
 5 TION RATES UNDER TMA.—Section 1925 of such Act,  
 6 as amended by subsections (a)(2) and (c), is amended by  
 7 adding at the end the following new subsection:

8 “(g) ADDITIONAL PROVISIONS.—

9 “(1) COLLECTION AND REPORTING OF PARTICI-  
 10 PATION INFORMATION.—Each State shall—

11 “(A) collect and submit to the Secretary,  
 12 in a format specified by the Secretary, informa-  
 13 tion on average monthly enrollment and average  
 14 monthly participation rates for adults and chil-  
 15 dren under this section; and

16 “(B) make such information publicly avail-  
 17 able.

18 Such information shall be submitted under subpara-  
 19 graph (A) at the same time and frequency in which  
 20 other enrollment information under this title is sub-  
 21 mitted to the Secretary. Using such information, the  
 22 Secretary shall submit to Congress annual reports  
 23 concerning such rates.”.

1 (e) COORDINATION OF WORK.—Section 1925(g) of  
 2 such Act, as added by subsection (d), is amended by add-  
 3 ing at the end the following new paragraph:

4 “(2) COORDINATION WITH ADMINISTRATION  
 5 FOR CHILDREN AND FAMILIES.—The Administrator  
 6 of the Centers for Medicare & Medicaid Services, in  
 7 carrying out this section, shall work with the Assist-  
 8 ant Secretary for the Administration for Children  
 9 and Families to develop guidance or other technical  
 10 assistance for States regarding best practices in  
 11 guaranteeing access to transitional medical assist-  
 12 ance under this section.”.

13 (f) ELIMINATION OF TMA REQUIREMENT FOR  
 14 STATES THAT EXTEND COVERAGE TO CHILDREN AND  
 15 PARENTS THROUGH 185 PERCENT OF POVERTY.—

16 (1) IN GENERAL.—Section 1925 of such Act is  
 17 further amended by adding at the end the following  
 18 new subsection:

19 “(h) PROVISIONS OPTIONAL FOR STATES THAT EX-  
 20 TEND COVERAGE TO CHILDREN AND PARENTS THROUGH  
 21 185 PERCENT OF POVERTY.—A State may (but is not re-  
 22 quired to) meet the requirements of subsections (a) and  
 23 (b) if it provides for medical assistance under this title  
 24 (whether under section 1931, through a waiver under sec-  
 25 tion 1115, or otherwise) to families (including both chil-

1 dren and caretaker relatives) the average gross monthly  
 2 earning of which (less such costs for such child care as  
 3 is necessary for the employment of a caretaker relative)  
 4 is at or below a level that is at least 185 percent of the  
 5 official poverty line (as defined by the Office of Manage-  
 6 ment and Budget, and revised annually in accordance with  
 7 section 673(2) of the Omnibus Budget Reconciliation Act  
 8 of 1981) applicable to a family of the size involved.”.

9 (2) CONFORMING AMENDMENTS.—Such section  
 10 is further amended, in subsections (a)(1) and (b)(1),  
 11 by inserting “, but subject to subsection (h),” after  
 12 “Notwithstanding any other provision of this title,”  
 13 each place it appears.

14 (g) REQUIREMENT OF NOTICE FOR ALL FAMILIES  
 15 LOSING TANF.—Subsection (a)(2) of such section is  
 16 amended by adding after and below subparagraph (B), the  
 17 following:

18 “Each State shall provide, to families whose aid  
 19 under part A or E of title IV has terminated but  
 20 whose eligibility for medical assistance under this  
 21 title continues, written notice of their ongoing eligi-  
 22 bility for such medical assistance. If a State makes  
 23 a determination that any member of a family whose  
 24 aid under part A or E of title IV is being terminated  
 25 is also no longer eligible for medical assistance under



1       this title, the notice of such determination shall be  
 2       supplemented by a one-page notification form de-  
 3       scribing the different ways in which individuals and  
 4       families may qualify for such medical assistance and  
 5       explaining that individuals and families do not have  
 6       to be receiving aid under part A or E of title IV in  
 7       order to qualify for such medical assistance.”.

8       (h) EXTENDING USE OF OUTSTATIONED WORKERS  
 9       TO ACCEPT APPLICATIONS FOR TRANSITIONAL MEDICAL  
 10       ASSISTANCE.—Section 1902(a)(55) of such Act (42  
 11       U.S.C. 1396a(a)(55)) is amended by inserting “and under  
 12       section 1931” after “(a)(10)(A)(ii)(IX)”.

13       (i) EFFECTIVE DATES.—(1) Except as provided in  
 14       this subsection, the amendments made by this section shall  
 15       apply to calendar quarters beginning on or after October  
 16       1, 2001, without regard to whether or not final regulations  
 17       to carry out such amendments have been promulgated by  
 18       such date.

19       (2) The amendment made by subsection (g) shall take  
 20       effect 6 months after the date of the enactment of this  
 21       Act.

22       (3) In the case of a State plan for medical assistance  
 23       under title XIX of the Social Security Act which the Sec-  
 24       retary of Health and Human Services determines requires  
 25       State legislation (other than legislation appropriating

1 funds) in order for the plan to meet the additional require-  
2 ments imposed by the amendments made by this section,  
3 the State plan shall not be regarded as failing to comply  
4 with the requirements of such title solely on the basis of  
5 its failure to meet these additional requirements before the  
6 first day of the first calendar quarter beginning after the  
7 close of the first regular session of the State legislature  
8 that begins after the date of the enactment of this Act.  
9 For purposes of the previous sentence, in the case of a  
10 State that has a 2-year legislative session, each year of  
11 such session shall be deemed to be a separate regular ses-  
12 sion of the State legislature.

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